

<i>SERFF Tracking Number:</i>	<i>EMCN-126446856</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>EMC National Life Company</i>	<i>State Tracking Number:</i>	<i>44519</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>A05I Individual Annuities- Immediate Non-Variable</i>	<i>Sub-TOI:</i>	<i>A05I.000 Annuities - Immediate Non-variable</i>
<i>Product Name:</i>	<i>Single Premium Immediate Annuity</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: EMC National Life Company

Product Name: Single Premium Immediate Annuity SERFF Tr Num: EMCN-126446856 State: Arkansas

TOI: A05I Individual Annuities- Immediate Non-Variable SERFF Status: Closed-Approved- Closed State Tr Num: 44519

Sub-TOI: A05I.000 Annuities - Immediate Non-variable Co Tr Num: State Status: Approved-Closed

Filing Type: Form

Author: Mark Rowley

Date Submitted: 01/09/2010

Reviewer(s): Linda Bird

Disposition Date: 01/15/2010

Disposition Status: Approved-Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name:

Project Number:

Requested Filing Mode:

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: Iowa is our state of domicile and is include in an Interstate Compact filing.

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 01/15/2010

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 01/12/2010

Deemer Date:

Submitted By: Mark Rowley

Filing Description:

Created By: Mark Rowley

Corresponding Filing Tracking Number:

This submission contains no unusual or possibly controversial items from normal company or industry standards.

Form ELP006 (1-10), Single Premium Immediate Annuity is a new form and will not replace an existing form. It is an individual, non-variable, non-participating form.

SERFF Tracking Number:	EMCN-126446856	State:	Arkansas
Filing Company:	EMC National Life Company	State Tracking Number:	44519
Company Tracking Number:			
TOI:	A05I Individual Annuities- Immediate Non-Variable	Sub-TOI:	A05I.000 Annuities - Immediate Non-variable
Product Name:	Single Premium Immediate Annuity		
Project Name/Number:	/		

It may be issued from ages 0 to 90 for a minimum payment of \$50. The maximum premium is \$300,000. This product will be marketed as a retirement income vehicle via face-to-face representatives on a qualified or non-qualified basis.

Once the Contract is issued the Annuity Option and the amount of the Annuity Income Payments become irrevocable and cannot be changed. The income being paid cannot be commuted.

The guaranteed interest rate is 2%.

This product is sex-distinct and will not be used in any employer-employee plans that are subject to the Norris decision and/or Title VII of the Civil Rights Act of 1964. It is a non-illustrative product.

This form was written to be readable and easily understood by insureds. The form achieved a flesch score of 54.8.

The form submitted has been completed in John Doe fashion. Bracketed matter shown in the contract is subject to change. A Specifications Page for each available Annuity Option has been included in this filing. The variable information on the Specifications Page will be unique to the Annuity Option described at the bottom of the page. The accompanying Statement of Variability provides an explanation of all variable items that could be applicable to this form.

Should you have any questions, please contact me at 515-237-2146, or via electronic mail at mjohnson@emcnl.com. Thank you.

Company and Contact

Filing Contact Information

Michele Johnson, Actuarial Analyst
4095 NW Urbandale Dr.
Urbandale, IA 50322

mjohnson@emcnl.com
515-237-2146 [Phone]
515-237-2281 [FAX]

Filing Company Information

EMC National Life Company
4095 NW Urbandale Drive
Urbandale, IA 50322-7914
(515) 645-4000 ext. 4094[Phone]

CoCode: 62928
Group Code:
Group Name:
FEIN Number: 42-0868851

State of Domicile: Iowa
Company Type: L and Health
State ID Number:

SERFF Tracking Number: EMCN-126446856 State: Arkansas
Filing Company: EMC National Life Company State Tracking Number: 44519
Company Tracking Number:
TOI: A05I Individual Annuities- Immediate Non- Sub-TOI: A05I.000 Annuities - Immediate Non-variable
Variable
Product Name: Single Premium Immediate Annuity
Project Name/Number: /

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: One policy form
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
EMC National Life Company	\$50.00	01/09/2010	33408384

SERFF Tracking Number: EMCN-126446856 State: Arkansas
Filing Company: EMC National Life Company State Tracking Number: 44519
Company Tracking Number:
TOI: A05I Individual Annuities- Immediate Non- Sub-TOI: A05I.000 Annuities - Immediate Non-variable
Variable
Product Name: Single Premium Immediate Annuity
Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	01/15/2010	01/15/2010
Approved-Closed	Linda Bird	01/12/2010	01/12/2010

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Form	Single Premium Immediate Annuity	Mark Rowley	01/13/2010	01/13/2010

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Incorrect Schedule Pages	Note To Filer	Linda Bird	01/13/2010	01/13/2010
Incorrect Schedule Pages	Note To Reviewer	Mark Rowley	01/13/2010	01/13/2010

<i>SERFF Tracking Number:</i>	<i>EMCN-126446856</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>EMC National Life Company</i>	<i>State Tracking Number:</i>	<i>44519</i>
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<i>TOI:</i>	<i>A05I Individual Annuities- Immediate Non-Variable</i>	<i>Sub-TOI:</i>	<i>A05I.000 Annuities - Immediate Non-variable</i>
<i>Product Name:</i>	<i>Single Premium Immediate Annuity</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Disposition

Disposition Date: 01/15/2010

Implementation Date:

Status: Approved-Closed

Comment: Company has corrected schedule pages in the original submission.

Rate data does NOT apply to filing.

SERFF Tracking Number: EMCN-126446856 State: Arkansas

Filing Company: EMC National Life Company State Tracking Number: 44519

Company Tracking Number:

TOI: A05I Individual Annuities- Immediate Non- Sub-TOI: A05I.000 Annuities - Immediate Non-variable
Variable

Product Name: Single Premium Immediate Annuity

Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form (revised)	Single Premium Immediate Annuity		Yes
Form	Single Premium Immediate Annuity	Replaced	Yes

<i>SERFF Tracking Number:</i>	<i>EMCN-126446856</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>EMC National Life Company</i>	<i>State Tracking Number:</i>	<i>44519</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>A05I Individual Annuities- Immediate Non-Variable</i>	<i>Sub-TOI:</i>	<i>A05I.000 Annuities - Immediate Non-variable</i>
<i>Product Name:</i>	<i>Single Premium Immediate Annuity</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Disposition

Disposition Date: 01/12/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: EMCN-126446856 State: Arkansas

Filing Company: EMC National Life Company State Tracking Number: 44519

Company Tracking Number:

TOI: A05I Individual Annuities- Immediate Non- Sub-TOI: A05I.000 Annuities - Immediate Non-variable
Variable

Product Name: Single Premium Immediate Annuity

Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form (revised)	Single Premium Immediate Annuity		Yes
Form	Single Premium Immediate Annuity	Replaced	Yes

SERFF Tracking Number: EMCN-126446856 State: Arkansas

Filing Company: EMC National Life Company State Tracking Number: 44519

Company Tracking Number:

TOI: A05I Individual Annuities- Immediate Non- Variable Sub-TOI: A05I.000 Annuities - Immediate Non-variable

Product Name: Single Premium Immediate Annuity

Project Name/Number: /

Amendment Letter

Submitted Date: 01/13/2010

Comments:

In my original filing the policy form included incorrect schedule pages. I have now included the correct schedule pages. Thanks for your patience.

Changed Items:

Form Schedule Item Changes:

Form Schedule Item Changes:

Form Number	Form Type	Form Name	Action	Form Action Other	Previous Filing #	Replaced Form #	Readability Score	Attachments
ELP006	Policy/Contract/Fraternal Certificate	Single Premium Immediate Annuity	Initial				54.800	ELP006(1-10).pdf

SERFF Tracking Number: *EMCN-126446856* *State:* *Arkansas*
Filing Company: *EMC National Life Company* *State Tracking Number:* *44519*
Company Tracking Number:
TOI: *A05I Individual Annuities- Immediate Non-Variable* *Sub-TOI:* *A05I.000 Annuities - Immediate Non-variable*
Product Name: *Single Premium Immediate Annuity*
Project Name/Number: */*

Note To Filer

Created By:

Linda Bird on 01/13/2010 12:26 PM

Last Edited By:

Linda Bird

Submitted On:

01/13/2010 12:26 PM

Subject:

Incorrect Schedule Pages

Comments:

Filing has been re-opened in order for corrections to be made.

Note To Reviewer

Mark Rowley on 01/13/2010 10:42 AM

Mark Rowley

01/13/2010 10:42 AM

Incorrect Schedule Pages

Subsequent to your approval of this form we unfortunately discovered that the schedule pages in the form we submitted were not correct. If you are able to reopen this filing I will do an amendment to correct this.

Thanks for your consideration,

Mark Rowley

SERFF Tracking Number: EMCN-126446856 State: Arkansas

Filing Company: EMC National Life Company State Tracking Number: 44519

Company Tracking Number:

TOI: A05I Individual Annuities- Immediate Non- Variable Sub-TOI: A05I.000 Annuities - Immediate Non-variable

Product Name: Single Premium Immediate Annuity

Project Name/Number: /

Form Schedule

Lead Form Number: ELP006

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	ELP006	Policy/Cont Single Premium ract/Fratern Immediate Annuity al Certificate	Initial		54.800	ELP006(1-10).pdf

EMC[®] **National Life Company**

A STOCK COMPANY ■ [4095 NW Urbandale Drive ■ Urbandale, IA 50322 ■ 1-800-232-5818]

ANNUITANT [JANE DOE] [MARCH 1, 2010] DATE OF ISSUE

AGE OF ANNUITANT [65] [RN004000] POLICY NUMBER

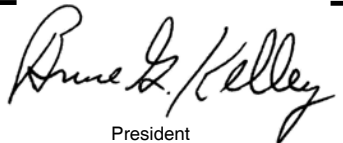
We will pay an income to the annuitant, if living, on the annuity date shown on the policy specifications page of this policy. Payments will be subject to policy provisions.


NOTICE OF 30 DAY RIGHT TO CANCEL THE POLICY

Within 30 days after you first receive this policy, it may be canceled for any reason by delivering or mailing it to the agent from whom it was purchased or to us at our home office. Delivery or mailing of this policy will void this policy from the date of issue. The premium paid for this policy will be refunded to you.

The benefits provided by this policy are subject to the provisions on this and the following pages. This policy is issued in consideration of the application and the payment of the single premium.

Signed for EMC National Life Company at its home office in Urbandale, Iowa.


President


Secretary

Please use our toll-free number listed above or our website address www.EMCNationalLife.com to present inquiries or obtain information about your coverage. You may contact us to provide assistance in resolving complaints or you may call your state insurance department at 1-8[xx-xxx-xxxx.]

SINGLE PREMIUM IMMEDIATE ANNUITY POLICY. Annuity Payable Beginning on Annuity Date. Single Premium Payable at Issue. Nonparticipating.

TABLE OF CONTENTS

This policy is a legal contract between the owner and us.

Read your policy carefully. This page is only a short outline of the important features of this policy. Only the provisions in this policy tell you what your rights and benefits are. It also explains what the owner and the Company must do.

READ YOUR POLICY CAREFULLY. IT IS IMPORTANT.

This policy provides an income to the annuitant, if living, on the annuity date shown on the policy specifications page.

ALPHABETICAL GUIDE TO YOUR POLICY

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Age of Annuitant	3
Anniversary of this Policy	5
Annuitant	3,5
Annuity Benefit	3,7
Annuity Date	3,5
Assignment	6
Beneficiary	5,6
Claims of Creditors	6
Incontestability	6
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Owner	5
Ownership	6
Policy Number	3
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Sex of Annuitant	3
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POLICY SPECIFICATIONS

FORM NUMBER: **ELP006 (1-10)**

POLICY: **SINGLE PREMIUM
IMMEDIATE ANNUITY**

ANNUITANT: **[JANE DOE]**

SEX: **[FEMALE]** AGE: **[65]**

ISSUE DATE: **[MARCH 01, 2010]**

POLICY NUMBER: **[RN004000]**

SINGLE PREMIUM: **[\$100,000.00]**

FIRST PAYMENT DATE: **[APRIL 01, 2010]**

BENEFIT AMOUNT: **[\$407.00 MONTHLY]**

LAST PAYMENT DATE: **[MARCH 01, 2040]**

LAST PAYMENT AMOUNT: **[315.45]**

PREMIUM EXPENSE CHARGE: **[3.0%]**

PRIMARY BENEFICIARY(IES): **[JOHN DOE]**

CONTINGENT BENEFICIARY(IES):

INCOME OF A SPECIFIED AMOUNT

EMC National Life Company will pay an income of an agreed amount and frequency. The amount will be paid until the principal and interest has been completely exhausted.

If the payee dies prior to the last payment date, payments in like amounts will continue to the beneficiary. The beneficiary may elect to take a commuted lump sum settlement of any remaining payments.

POLICY SPECIFICATIONS

FORM NUMBER: **ELP006 (1-10)**

POLICY: **SINGLE PREMIUM
IMMEDIATE ANNUITY**

ANNUITANT: **[JANE DOE]**

SEX: **[FEMALE]** AGE: **[65]**

ISSUE DATE: **[MARCH 01, 2010]**

POLICY NUMBER: **[RN004000]**

SINGLE PREMIUM: **[\$100,000.00]**

FIRST PAYMENT DATE: **[APRIL 01, 2010]**

BENEFIT AMOUNT: **[\$570.36 MONTHLY]**

PREMIUM EXPENSE CHARGE: **[3.0%]**

PRIMARY BENEFICIARY(IES): **[JOHN DOE]**

CONTINGENT BENEFICIARY(IES):

INCOME FOR LIFE -- LIFE ONLY ANNUITY

EMC National Life Company will pay a life income in equal MONTHLY payments to the payee. This income will be paid as long as the payee lives. No benefits are payable after the payee's death.

POLICY SPECIFICATIONS

FORM NUMBER: **ELP006 (1-10)**

POLICY: **SINGLE PREMIUM
IMMEDIATE ANNUITY**

ANNUITANT: **[JANE DOE]**

SEX: **[FEMALE]** AGE: **[65]**

ISSUE DATE: **[MARCH 01, 2010]**

POLICY NUMBER: **[RN004000]**

SINGLE PREMIUM: **[\$100,000.00]**

FIRST PAYMENT DATE: **[APRIL 01, 2010]**

BENEFIT AMOUNT: **[\$577.75 MONTHLY]**

PREMIUM EXPENSE CHARGE: **[3.0%]**

PRIMARY BENEFICIARY(IES): **[JOHN DOE]**

CONTINGENT BENEFICIARY(IES):

INCOME FOR LIFE -- [10] YEARS CERTAIN AND LIFE ANNUITY

EMC National Life Company will pay a life income in equal Monthly payments to the payee for as long as the payee lives. If the payee dies within [10] years after the income payments start, the beneficiary will continue to receive this income until the end of the [10] year certain period. The beneficiary may elect to take a commuted lump sum settlement of any remaining payments.

POLICY SPECIFICATIONS

FORM NUMBER: **ELP006 (1-10)**

POLICY: **SINGLE PREMIUM
IMMEDIATE ANNUITY**

ANNUITANT: **[JANE DOE]**

SEX: **[FEMALE]** AGE: **[65]**

ISSUE DATE: **[MARCH 01, 2010]**

POLICY NUMBER: **[RN004000]**

SINGLE PREMIUM: **[\$100,000.00]**

FIRST PAYMENT DATE: **[APRIL 01, 2010]**

BENEFIT AMOUNT: **[\$935.08 MONTHLY]**

LAST PAYMENT DATE: **[MARCH 01, 2020]**

PREMIUM EXPENSE CHARGE: **[3.0%]**

PRIMARY BENEFICIARY(IES): **[JOHN DOE]**

CONTINGENT BENEFICIARY(IES):

INCOME FOR A SPECIFIED PERIOD

EMC National Life Company will pay an income for [10] years elected to equal payments.

If the payee dies prior to the last payment date, payments in like amounts will continue to the beneficiary. The beneficiary may elect to take a commuted lump sum settlement of any remaining payments.

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DEFINITIONS

AGE:	The annuitant's age last birthday.
ANNIVERSARY OF THIS POLICY:	The same day and month each year as the issue date.
ANNUITANT:	The person or persons who will receive the payments shown on the policy specifications page.
ANNUITY DATE:	The first payment date. The first payment date is shown on the policy specifications page.
APPLICATION:	The form that was filled out to get this policy. A copy is attached to this policy.
BENEFICIARY:	The person named in our records to receive the proceeds at the annuitant's death, upon receipt of due proof of death.
BENEFITS:	What we have agreed to do and what we will pay.
ISSUE DATE:	This is the date this policy takes effect as shown on the policy specifications page.
NONPARTICIPATING:	Dividends will not be paid on this policy.
OWNER:	The person named in the application as owner.
PAYEE:	The annuitant. The person or persons who will receive the payments shown on the policy specifications page.
THIS POLICY:	A contract creating an income.
WE, OUR, US:	EMC National Life Company.
YOU, YOUR:	The owner of this policy.

GENERAL PROVISIONS

ENTIRE CONTRACT

This policy is a legal contract between you and us. It consists of this policy, a copy of the application and any papers attached by us.

You applied for this policy. We issued it. You paid the single premium. All statements in this application, except for those made to defraud us, are considered to be based on your present knowledge and belief. They are not warranties. No statement made by you, except those in the application, may be used by us to defend against a claim.

The only way this policy may be changed is by written agreement. It must be signed by our officers. No agent or other person has our permission to change this policy. No other person has the right to tell you that one or more of its terms or provisions do not apply to you. This policy may not be issued to fund a bond.

INCONTESTABILITY

This policy shall be incontestable from the issue date.

MISSTATEMENT OF AGE OR SEX

If the annuitant's age or sex has been misstated, the amount payable will be based on the correct age or sex.

BENEFICIARY

Unless an irrevocable beneficiary has been named, you have the right to change the beneficiary. Notify us in writing. We will record the change. It will take effect the date you sign it, after we have recorded it. The change is subject to any action we may have taken before it is recorded.

If an irrevocable beneficiary has been named, that beneficiary must agree in writing to any change. If you assign this policy, you may also give up the right to change the beneficiary.

If no beneficiary survives the annuitant, the proceeds will go to you or to your estate if you do not survive the annuitant.

ASSIGNMENT

You may assign this policy in writing on a form acceptable to us while the annuitant is alive. The assignment will not be in effect until the written form has been received and recorded by us. Once received by us, the assignment will take effect on the date the notice of assignment is signed, subject to any payments made or actions taken by us prior to receipt of this notice. We will not be responsible for the validity or effect of any assignment.

OWNERSHIP

The owner named in the application for this policy or a successor owner has all policy rights and privileges while the annuitant is living. If no one is named as the owner, the annuitant is the owner. If the owner who is not the annuitant, dies before the annuitant, the annuitant becomes the new owner unless you have notified us otherwise.

TRANSFER OF OWNERSHIP

Ownership may be transferred by giving us acceptable written notice while the annuitant is living. After we have recorded the transfer, it takes effect on the date it was signed by the owner. The transfer is subject to any action we may have taken before it is recorded.

CLAIMS OF CREDITORS

Any payments under this policy will be exempt from the claims of creditors as permitted by law. No future payments may be assigned or withdrawn without our prior written agreement.

LIMITATIONS

If any benefit payment is less than \$100, we may change the frequency of the payment so the payment is at least \$100.

Once payments begin, you may not cash in this policy.

PREMIUM PROVISION

PREMIUM PAYMENT

The total single premium is shown on the policy specifications page. It is payable on the issue date. It may be paid either at our home office or to our duly authorized agent in exchange for our receipt signed by our President or Secretary and duly countersigned. The principal amount will be the single premium minus an expense charge that is shown on the policy specifications page.

We reserve the right to deduct from the single premium any premium taxes required by state law.

ANNUITY BENEFITS

BENEFIT PAYMENTS

We will make benefit payments to the annuitant according to the provision outlined on the policy specifications page. Any benefits available under this contract are calculated using an interest rate of not less than 2.00%

SINGLE PREMIUM IMMEDIATE ANNUITY POLICY. Annuity Payable Beginning on Annuity Date. Single Premium Payable at Issue. Nonparticipating.



A STOCK COMPANY ■ 4095 NW Urbandale Drive ■ Urbandale, IA 50322 ■ 1-800-232-5818

EMC, flag design and *Count on EMC* are registered trademarks of Employers Mutual Casualty Company.

[]

SERFF Tracking Number: EMCN-126446856 State: Arkansas
Filing Company: EMC National Life Company State Tracking Number: 44519
Company Tracking Number:
TOI: A05I Individual Annuities- Immediate Non- Sub-TOI: A05I.000 Annuities - Immediate Non-variable
Variable
Product Name: Single Premium Immediate Annuity
Project Name/Number: /

Supporting Document Schedules

Item Status: Status
Date:

Satisfied - Item: Flesch Certification

Comments:

Attachments:

ELP006 Readability.pdf

Cert of Compliance.pdf

Item Status: Status
Date:

Satisfied - Item: Application

Comments:

Application form EAP003 (12-07) was approved by the Arkansas Insurance Department on December 12, 2007. It will be used with this new annuity policy form.

Item Status: Status
Date:

Satisfied - Item: Statement of Variability

Comments:

Attachment:

SPIA - Stmt of Variability - ELP006.pdf

READABILITY

CERTIFICATION

I certify to the best of my knowledge that form ELP006 (1-10) is readable based on the factors specified in Sections 66-3251 to 66-3258 of the Arkansas Statutes. The Flesch Scores are as follows:

<u>Form Number</u>	<u>Flesch Score</u>
ELP006 (1-10)	54.8



Mark C. Rowley, FSA, MAAA
Vice President, Managing Actuary
January 9, 2010

STATE OF ARKANSAS
CERTIFICATE OF COMPLIANCE

I hereby certify that this submission complies with the Arkansas Rule and Regulation 19 which relates to eliminating the act of denying benefits or coverage on the basis of sex or marital status in the terms and conditions of insurance contracts or underwriting criteria, as applicable.

I hereby certify that this submission complies with the Arkansas Rule and Regulation 49 which relates to providing Life and Health Guaranty Association notices, as applicable.

I hereby certify that this submission complies with the Arkansas Statutes – Insurance Laws 23-79-138 which relates to required policy information on every policy of life insurance, accident and health insurance issued, as applicable.



Mark C. Rowley, FSA, MAAA
Vice President, Managing Actuary

January 9, 2010

Date

EMC National Life Company
Statement of Variability

Single Premium Deferred Annuity Contract Form No. ELP006 (1-10)

**1. Company Address and Phone Number –
Cover Page and Page 8**

In the event of a change in the company address and/or phone number, the new information will be shown.

**2. Company Officer's Signatures and Titles –
Cover Page**

In the event of a change in company officers, the new company officer's signature and title will be shown.

**3. Department of Insurance Phone Number –
Cover Page**

The phone number for the Department of Insurance for the state the Contract is issued in will be displayed.

**4. Annuitant, Date of Issue, Policy Number, Age of Annuitant, Sex, Single Premium –
Cover Page and Specifications Page (Page 3)**

Annuitant specific information will be displayed in these fields.

**5. Primary Beneficiary(ies), Contingent Beneficiary(ies) –
Specifications Page (Page 3)**

Designated by annuitant.

**6. Annuity Payment Information (will vary by Annuity Option)–
Specifications Page (Page 3)**

The Annuity Option (Income of a Specified Amount, Income for Life – Life Only Annuity, Income for Life with Period Certain, or Income for a Specified Period) is designated by the annuitant. Within each option the First Payment Date is designated by the annuitant.

Income of a Specified Amount

First Payment Date

Benefit Amount

Last Payment Date

Last Payment Amount

The Benefit Amount is designated by the annuitant. Last Payment Date and Last Payment Amount are determined based on current purchase rates and premium expense charges. Current purchase rates reflect our assessment of interest rate and mortality environments, and our internal levels of expenses.

Income for Life – Life Only Annuity

First Payment Date

Benefit Amount

Benefit Amount is determined based on current purchase rates and premium expense charges. Current purchase rates reflect our assessment of interest rate and mortality environments, and our internal levels of expenses.

Income for Life with Period Certain

First Payment Date

Benefit Amount

Certain Period (in years)

Certain Period is designated by the annuitant. Benefit Amount is determined based on current purchase rates and premium expense charges. Current purchase rates reflect our assessment of interest rate and mortality environments, and our internal levels of expenses.

Income for a Specified Period

First Payment Date

Benefit Amount

Last Payment Date

Specified Period (years)

The Specified Period is designated by the annuitant. The Last Payment Date is computed by combining the First Payment Date and the Specified Period. Benefit Amount is determined based on current purchase rates and premium expense charges. Current purchase rates reflect our assessment of interest rate and mortality environments, and our internal levels of expenses.

7. **Premium Expense Charge –
Specifications Page (Page 3)**

This charge reflects our internal levels of expenses.

<i>SERFF Tracking Number:</i>	<i>EMCN-126446856</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>EMC National Life Company</i>	<i>State Tracking Number:</i>	<i>44519</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>A05I Individual Annuities- Immediate Non-Variable</i>	<i>Sub-TOI:</i>	<i>A05I.000 Annuities - Immediate Non-variable</i>
<i>Product Name:</i>	<i>Single Premium Immediate Annuity</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
01/09/2010	Form	Single Premium Immediate Annuity	01/13/2010	ELP006(1-10).pdf (Superceded)

EMC[®] **National Life Company**

A STOCK COMPANY ■ [4095 NW Urbandale Drive ■ Urbandale, IA 50322 ■ 1-800-232-5818]

ANNUITANT [JANE DOE] [MARCH 1, 2010] DATE OF ISSUE

AGE OF ANNUITANT [65] [RN004000] POLICY NUMBER

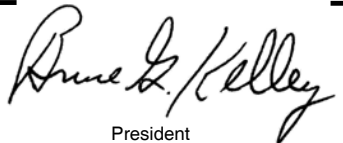
We will pay an income to the annuitant, if living, on the annuity date shown on the policy specifications page of this policy. Payments will be subject to policy provisions.


NOTICE OF 30 DAY RIGHT TO CANCEL THE POLICY

Within 30 days after you first receive this policy, it may be canceled for any reason by delivering or mailing it to the agent from whom it was purchased or to us at our home office. Delivery or mailing of this policy will void this policy from the date of issue. The premium paid for this policy will be refunded to you.

The benefits provided by this policy are subject to the provisions on this and the following pages. This policy is issued in consideration of the application and the payment of the single premium.

Signed for EMC National Life Company at its home office in Urbandale, Iowa.


President


Secretary

Please use our toll-free number listed above or our website address www.EMCNationalLife.com to present inquiries or obtain information about your coverage. You may contact us to provide assistance in resolving complaints or you may call your state insurance department at 1-8[xx-xxx-xxxx.]

SINGLE PREMIUM IMMEDIATE ANNUITY POLICY. Annuity Payable Beginning on Annuity Date. Single Premium Payable at Issue. Nonparticipating.

TABLE OF CONTENTS

This policy is a legal contract between the owner and us.

Read your policy carefully. This page is only a short outline of the important features of this policy. Only the provisions in this policy tell you what your rights and benefits are. It also explains what the owner and the Company must do.

READ YOUR POLICY CAREFULLY. IT IS IMPORTANT.

This policy provides an income to the annuitant, if living, on the annuity date shown on the policy specifications page.

ALPHABETICAL GUIDE TO YOUR POLICY

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POLICY SPECIFICATIONS

LP207

SINGLE PREMIUM IMMEDIATE ANNUITY

INCOME FOR LIFE - LIFE ONLY INCOME OPTION

WE WILL PAY THE BENEFIT AMOUNT TO THE PAYEE. THIS INCOME WILL BE PAID AS LONG AS THE PAYEE LIVES.

BENEFIT AMOUNT: \$600.00

FIRST PAYMENT DATE 10/15/1994

FREQUENCY OF PAYMENT: QUARTERLY

ANNUITANT: JOHN DOE

MALE AGE 50

policy NUMBER: TEST0008

ISSUE DATE: JULY 15, 1994

SINGLE PREMIUM: \$55,000.00

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DEFINITIONS

AGE:	The annuitant's age last birthday.
ANNIVERSARY OF THIS POLICY:	The same day and month each year as the issue date.
ANNUITANT:	The person or persons who will receive the payments shown on the policy specifications page.
ANNUITY DATE:	The first payment date. The first payment date is shown on the policy specifications page.
APPLICATION:	The form that was filled out to get this policy. A copy is attached to this policy.
BENEFICIARY:	The person named in our records to receive the proceeds at the annuitant's death, upon receipt of due proof of death.
BENEFITS:	What we have agreed to do and what we will pay.
ISSUE DATE:	This is the date this policy takes effect as shown on the policy specifications page.
NONPARTICIPATING:	Dividends will not be paid on this policy.
OWNER:	The person named in the application as owner.
PAYEE:	The annuitant. The person or persons who will receive the payments shown on the policy specifications page.
THIS POLICY:	A contract creating an income.
WE, OUR, US:	EMC National Life Company.
YOU, YOUR:	The owner of this policy.

GENERAL PROVISIONS

ENTIRE CONTRACT

This policy is a legal contract between you and us. It consists of this policy, a copy of the application and any papers attached by us.

You applied for this policy. We issued it. You paid the single premium. All statements in this application, except for those made to defraud us, are considered to be based on your present knowledge and belief. They are not warranties. No statement made by you, except those in the application, may be used by us to defend against a claim.

The only way this policy may be changed is by written agreement. It must be signed by one of our officers. No agent or other person has our permission to change this policy. No other person has the right to tell you that one or more of its terms or provisions do not apply to you. This policy may not be issued to fund a bond.

INCONTESTABILITY

This policy shall be incontestable from the issue date.

MISSTATEMENT OF AGE OR SEX

If the annuitant's age or sex has been misstated, the amount payable will be based on the correct age or sex.

BENEFICIARY

Unless an irrevocable beneficiary has been named, you have the right to change the beneficiary. Notify us in writing. We will record the change. It will take effect the date you sign it, after we have recorded it. The change is subject to any action we may have taken before it is recorded.

If an irrevocable beneficiary has been named, that beneficiary must agree in writing to any change. If you assign this policy, you may also give up the right to change the beneficiary.

If no beneficiary survives the annuitant, the proceeds will go to you or to your estate if you do not survive the annuitant.

ASSIGNMENT

You may assign this policy in writing on a form acceptable to us while the annuitant is alive. The assignment will not be in effect until the written form has been received and recorded by us. Once received by us, the assignment will take effect on the date the notice of assignment is signed, subject to any payments made or actions taken by us prior to receipt of this notice. We will not be responsible for the validity or effect of any assignment.

OWNERSHIP

The owner named in the application for this policy or a successor owner has all policy rights and privileges while the annuitant is living. If no one is named as the owner, the annuitant is the owner. If the owner who is not the annuitant, dies before the annuitant, the annuitant becomes the new owner unless you have notified us otherwise.

TRANSFER OF OWNERSHIP

Ownership may be transferred by giving us acceptable written notice while the annuitant is living. After we have recorded the transfer, it takes effect on the date it was signed by the owner. The transfer is subject to any action we may have taken before it is recorded.

CLAIMS OF CREDITORS

Any payments under this policy will be exempt from the claims of creditors as permitted by law. No future payments may be assigned or withdrawn without our prior written agreement.

LIMITATIONS

If any benefit payment is less than \$100, we may change the frequency of the payment so the payment is at least \$100.

Once payments begin, you may not cash in this policy.

PREMIUM PROVISION

PREMIUM PAYMENT

The total single premium is shown on the policy specifications page. It is payable on the issue date. It may be paid either at our home office or to our duly authorized agent in exchange for our receipt signed by our President or Secretary and duly countersigned. The principal amount will be the single premium minus an expense charge that is shown on the policy specifications page.

We reserve the right to deduct from the single premium any premium taxes required by state law.

ANNUITY BENEFITS

BENEFIT PAYMENTS

We will make benefit payments to the annuitant according to the provision outlined on the policy specifications page. Any benefits available under this contract are calculated using an interest rate of not less than 2.00%

SINGLE PREMIUM IMMEDIATE ANNUITY POLICY. Annuity Payable Beginning on Annuity Date. Single Premium Payable at Issue. Nonparticipating.



A STOCK COMPANY ■ 4095 NW Urbandale Drive ■ Urbandale, IA 50322 ■ 1-800-232-5818

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